2003 LIMITED LIABILITY COMPANY

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L98000002115

DIMNACLE DOOLS 11 C



FILED Apr 03, 2003 8:00 am Secretary of State

04-03-2003 90017 021 ****55.00

PINNACLE	roots, L.L.G.									
•			Mailing Address 14255 US HWY ONE							
SUITE 2160 JUNO BEACH FL 33408		(SUITE 2160 JUNO BEACH FL 33408		 	in die Edua: (Den da ni Sa ni)	13 111 11 111 11 11 1 111		10: 0 .3: 1 10 :	
2. Principal Place of Business			3. Mailing Address			1 ·				
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17 B			17 B			☑ CHECK HERE IF MAKING CHANGES				
City & State	, FL		City & State Tup.lur	FL		4. FEI Numi	oer 65-087137 3		No	plied For at Applicable
Zip	Country		Zip	Country		5. Certificat	e of Status Desired		00 Add	
37458.5	6. Name and Address	of Current Reg	334 <i>≤</i> 8、 <i>5</i> ℃で5 istered Agent	٨٤٥		7. Name an	d Address of New Re			-
				Name	Tom	^	و الدستي والمحدد المتوجع في المدارات	-		
14233 03 HWT ONE, 30HE 2100					Street Address (P.O. Box Number is Not Acceptable) 1312 Commerce Lone					
JUNO BEACH FL 33408			Seni							
				City	, h-e (7.6		FL	Zip Code	е
• The above	named entity submits this s	tatement for the	nurnose of changing its	registered office of	r register	rediagent or hi	oth, in the State of Flor	!		and accept
	ons of registered agent.	tatement for the	pulpose of chariging its	registered office c	n register	ed agent, or bi	out, in the state of thor	iod. Tani izini	LI WICE,	una accept
SIGNATURE .	Signature, typed or printed name of re	gistered agent and tit	le if applicable. (NOTE	: Registered Agent signa	ature required	when reinstating)		DATE		}
			FILE NO	WIII FEE IS	\$50.00					
			Make Check Payabl		*	nt of State				
			Due	By May 1, 200	03	İ				
9.		NG MEMBERS/		10.	,	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/			
TITLE	MGR		☐ Delete	TITLE				· 💁	-Change	☐ Addition
NAME STREET ADDRESS	RICE, TOM 14255 US HWY ONE,	SUITE 2160		NAME STREET ADDRESS	1312	Commerce	Lone, Suite	กล		į.
CITY-ST-ZIP	JUNO BEACH FL 334			CITY-ST-ZIP	Jug.	.hr. Fl	33428- 25 B	5		
TITLE	MGR		☐ Delete	TITLE				Ø	Change	☐ Addition
NAME	DUBE, DAVID	OLUTE A100		NAME STREET ADDRESS	1312	(manage	a Lucy Swil	L ng		-
STREET ADDRESS CITY-ST-ZIP	14255 US HWY ONE			CITY-ST-ZIP	I	ilor, FC	33458-56			
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STREET ADDRESS				STREET ADDRESS						
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NAME Street address	i			NAME STREET ADDRESS						
CITY-ST-ZIP		^		CITY-ST-ZIP						
11 boroby c	eartify that the information of	unlind with this	filing does not qualify for	the everantion st	ated in Se	action 119.07/3	Vi) Florida Statutes I	further certify t	hat the it	formation

I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

7-28-03 Date

521 741- RUUI

Daytime Phone #